



COMMERCIAL BUILDING PERMIT APPLICATION

CAMPBELL COUNTY PLANNING & ZONING
1010 Monmouth St., Newport, KY 41071-0340
Phone (859) 292-3880 Fax (859) 547-1868
www.campbellcountyky.org

Project Name (if applicable) _____ **PIDN** 999-99- ____ - ____ . ____

Project address _____ **Project located in** ☐ Unincorporated Campbell County,
or in the City of ☐ Bellevue ☐ California ☐ Crestview ☐ Dayton ☐ Melbourne ☐ Silver Grove ☐ Southgate ☐ Woodlawn

	Property Owner	General Contractor	Applicant
Name			
Address			
City			
State/Zip			
Phone			
FAX #			
Cell #			
E-MAIL			

Architect _____ **Phone** _____ **Fax** _____
Address _____

Engineer _____ **Phone** _____ **Fax** _____
Address _____

Design professional in responsible charge : _____ ☐ Architect ☐ Engineer

Proposed activity (✓ all that apply) ☐ New Construction ☐ Remodeling ☐ Addition ☐ Change of Use / Occupancy
☐ Electric ☐ HVAC ☐ Fire Suppression ☐ Fire Alarm ☐ Range Hood ☐ Other _____
☐ Zoning Approval only (Building plans being reviewed by State Office of Housing, Building and Construction)

Total square footage of existing building _____ sf **of addition(s) / Remodeled area** _____ sf

Number of stories (Incl. basement) ____ **Basement?** ☐ Yes ☐ No **Estimated Cost of Project** \$ _____

Existing Use(s) of Building _____

Proposed Use of Building/addition/remodeled area: _____

Number of Units ____ **Use Group Classification** (KBC Chapter 3) ____ **Construction Type** (KBC Chapter 6) ____

Floodplain. Is any portion of this project located in a Floodplain? ☐ Yes ☐ No *If yes, attach copy of "Kentucky Division of Water Stream Construction Permit"*

Steep Slopes Is any portion of this project located on a Hillside Slope of 20% or Greater? ☐ Yes ☐ No

Applicant Signature I hereby certify that the information contained in this application and attachments is true and correct and that any misrepresentations or misstatement of facts shall be grounds for denial or revocation of the permit.

SIGNATURE _____ **PRINTED NAME** _____ **DATE** _____

All fees are non-refundable. Permit fees are doubled if the building has been started prior to issuance of the building permit.
 The following documents are required for all construction projects and must be submitted with the application.
 Check which documents are being submitted:

- ☐ Two sets of building plans
- ☐ Two copies of site plan
- ☐ Construction Affidavit* (Workers Compensation and Unemployment Insurance)
- ☐ Contractors Occupational License (Campbell County and applicable City)
- ☐ List of Subcontractors – name and address
- ☐ Permit fee, payable to Campbell County Planning and Zoning
- ☐ Liability Insurance Certificate
- ☐ Division of Water Stream Construction Permit (if located in floodplain)

The following Shop Drawings may be submitted for review at a later date, but prior to installation.

- | | | |
|------------------------|--|--------------------------------|
| Truss drawings | <input type="checkbox"/> Submitted now | <input type="checkbox"/> Later |
| HVAC Plans | <input type="checkbox"/> Submitted now | <input type="checkbox"/> Later |
| Fire Suppression plans | <input type="checkbox"/> Submitted now | <input type="checkbox"/> Later |
| Fire Alarm Plans | <input type="checkbox"/> Submitted now | <input type="checkbox"/> Later |
| Range Hood Plans | <input type="checkbox"/> Submitted now | <input type="checkbox"/> Later |
| Elevator Plans | <input type="checkbox"/> Submitted now | <input type="checkbox"/> Later |

The following are required when applicable. Check which documents are submitted with this application:

- ☐ County* or State Road Encroachment Permit
- ☐ New address Application*
- ☐ Water Service Tap Review* (No. KY Water Dist.)
- ☐ Septic System Construction Permit
- ☐ Copy of Plat

* Downloadable application forms available at www.campbellcounty.ky.gov under County Services / Planning and Zoning

Permit Fee Calculator

_____	\$ 100	Zoning Permit (all new construction, addition and change of use or occupancy) **
_____		Building Permit (Total square footage _____ x .15 per sf
_____	\$ 50	Shop Drawing review (for plans submitted with this application)
_____	\$ 30	Electric Permit
_____	\$ 50	HVAC Permit
_____	\$ 50	Encroachment Permit (for County Road only)
_____	Other _____	

\$ _____ Total fees. Make checks payable to Campbell County Planning and Zoning

** Zoning Permits for projects located in Bellevue are issued by the City of Bellevue 859-261-8387

INFORMATION BELOW TO BE COMPLETED BY BUILDING OFFICIAL

APPLICATION NO. _____	FEES	DATE RECEIVED _____
Zoning _____	Zoning _____	APPROVED APP. W / CONDITIONS
Building _____	Building _____	<input type="checkbox"/> Building <input type="checkbox"/> Building
Electrical _____	Electrical _____	<input type="checkbox"/> Zoning <input type="checkbox"/> Zoning
	Encroachment _____	Permit Issued _____
ZONE _____	CO _____	by _____
Sq. footage _____	Late Penalty _____	
	Total Fees _____	Rec. _____ <input type="checkbox"/> Check no. _____ <input type="checkbox"/> Cash